

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

1 2 F E 4 M 5

CITIZENS FOR RUSH

ADDRESS (number and street)

P. O. Box 7292

Check if different
than previously
reported. (ACC)

CHICAGO

IL

60680-7292

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00257121

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IL

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2016

through

M M / D D / Y Y Y Y
09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Jackson, Sheila L., , ,

Type or Print Name of Treasurer

Jackson, Sheila L., , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 18 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 31

Write or Type Committee Name
CITIZENS FOR RUSH

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46525.00	549280.00
(b) Total Contribution Refunds (from Line 20(d))	3200.00	3200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	43325.00	546080.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	73027.58	581471.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	300.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	73027.58	581171.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	18311.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25589.43	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 31

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

CITIZENS FOR RUSH

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

0.00

120450.00

(ii) Unitemized.....

25.00

630.00

(iii) TOTAL of contributions from individuals ▶

25.00

121080.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

46500.00

428200.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

46525.00

549280.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

300.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

46525.00

549580.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 31

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	73027.58	581471.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	3200.00	3200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3200.00	3200.00
21. OTHER DISBURSEMENTS	12000.00	27589.93
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	88227.58	612261.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	60014.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46525.00
25. SUBTOTAL (add Line 23 and Line 24).....	106539.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88227.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	18311.88

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC
Mailing Address **WORLDWIDE HEADQUARTERS**

City State Zip Code
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 14 2016

Transaction ID : **SA11C.18536**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION
Mailing Address **1891 Preston White Drive**

City State Zip Code
Reston VA 20191

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 30 2016

Transaction ID : **SA11C.18570**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED
Mailing Address **1625 L STREET NW**

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 07 2016

Transaction ID : **SA11C.18541**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 31

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)
 AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

A. Mailing Address 1625 L STREET NW

City State Zip Code
 WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 8500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 14 2016

Transaction ID : SA11C.18612

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN SOCIETY OF PLASTIC SURGEONS

Mailing Address 444 EAST ALGONQUIN RD

City State Zip Code
 ARLINGTON HEIGHTS IL 60005

FEC ID number of contributing federal political committee. **C** C00249342

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 14 2016

Transaction ID : SA11C.18535

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
C. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address P.O. Box 961039
 Suite 220

City State Zip Code
 Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 15 2016

Transaction ID : SA11C.18540

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
CIGNA CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 601 PENNSYLVANIA AVENUE NW
 SOUTH BUILDING SUITE 835

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 22 2016

Transaction ID : SA11C.18548

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii Street
 C/O CONGRESSIONAL CONSULTANTS

City El Segundo State CA Zip Code 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 20 2016

Transaction ID : SA11C.18562

Amount of Each Receipt this Period

1500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC

Mailing Address 2273 Research Blvd
 Suite 400

City Rockville State MD Zip Code 20850

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 20 2016

Transaction ID : SA11C.18561

Amount of Each Receipt this Period

1500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH**A.** Full Name (Last, First, Middle Initial)
EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELONPAC)

Mailing Address 1 FINANCIAL PLACE

440 S. LASALLE ST. 33RD FLOOR

City
CHICAGOState
ILZip Code
60605FEC ID number of contributing
federal political committee.**C** C00141218

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

Transaction ID : SA11C.18569

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)**GOOGLE INC. NETPAC**

Mailing Address 1101 New York Ave NW

Second Floor

City
WashingtonState
DCZip Code
20005FEC ID number of contributing
federal political committee.**C** C00428623

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	6

Transaction ID : SA11C.18537

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)**INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS**

Mailing Address 1750 NEW YORK NW

City
WASHINGTONState
DCZip Code
20006FEC ID number of contributing
federal political committee.**C** C70003108

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

Transaction ID : SA11C.18572

Amount of Each Receipt this Period

1500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Legislative Education Action Program
Mailing Address 753 State Avenue, Suite 565

City State Zip Code
Kansas City KS 66101

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 22 2016

Transaction ID : SA11C.18543

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
MACHINISTS NON-PARTISAN POLITICAL LEAGUE
Mailing Address 9000 MACHINISTS PLACE

City State Zip Code
UPPER MARLBORO MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 14 2016

Transaction ID : SA11C.18611

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE
Mailing Address 1455 PENNSYLVANIA AVENUE, NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 22 2016

Transaction ID : SA11C.18549

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. Mailing Address 606 NORTH WASHINGTON STREET

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11C.18559

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

B. Mailing Address 1771 N Street NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.18568

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALEERS ASSOCIATION POLITICAL ACTION COMMITTEE

C. Mailing Address 1101 King Street
Suite 600

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11C.18558

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 11 OF 31

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
NUCLEAR ENERGY INSTITUTE FED POLITICAL ACTION COMMITTEE
Mailing Address 1776 I ST NW SUITE 400

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 30 2016

Transaction ID : SA11C.18560

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
PG&E CORPORATION ENERGYPAC
Mailing Address 77 BEALE STREET B29H

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 29 2016

Transaction ID : SA11C.18557

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
POWER PAC OF THE EDISON ELECTRIC INSTITUTE
Mailing Address 701 PENNSYLVANIA AVENUE N W

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 28 2016

Transaction ID : SA11C.18554

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVE

City State Zip Code
 CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 10 2016

Transaction ID : SA11C.18613

Amount of Each Receipt this Period

3000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
 SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL

Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
 WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C70001136

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 14 2016

Transaction ID : SA11C.18534

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
 STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
 C/O MARK SCHWAMBERGER, TREASURER,

City State Zip Code
 BLOOMINGTON IL 61710

FEC ID number of contributing federal political committee. **C** C00544817

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 16 2016

Transaction ID : SA11C.18563

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
UNITED AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 66100
 ATTENTION: CATHY NICHOLS-WHQAJ

City CHICAGO State IL Zip Code 60666

FEC ID number of contributing federal political committee. **C** C00078261

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11C.18544

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : SA11C.18538

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3500.00
 46500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
CONTRIBUTIN COLLECTION FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : SB17.18620

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Allstate Insurance Company

Mailing Address Not Available

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Automobile Insurance

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

111.95

Transaction ID : SB17.18577

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Allstate Insurance Company

Mailing Address Not Available

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Automobile Insurance

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

111.95

Transaction ID : SB17.18578

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

224.89

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Allstate Insurance Company

Mailing Address Not Available

Date of Disbursement

M M	D D	Y Y Y Y
09	01	2016

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Automobile Insurance

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

111.95

Transaction ID : SB17.18579

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Allstate Insurance Company

Mailing Address Not Available

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2016

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Automobil Insurance

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

111.95

Transaction ID : SB17.18580

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Angerholzer Broz Consulting, LLCMailing Address 499 South Capitol Street SW
Suite 422

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Fundraising Consultant

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.18602

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

25223.90

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Angerholzer Broz Consulting, LLCMailing Address 499 South Capitol Street SW
Suite 422City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Fundraiser Consultant Expense

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	03	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.18576

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. A T & T

Mailing Address Bill Payment Center

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Mobil Phone Equipment

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

76.86

Transaction ID : SB17.18605

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. A T & T

Mailing Address Bill Payment Center

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Mobile Telephone Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	27	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

506.43

Transaction ID : SB17.18583

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

20583.29

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. A T & T

Mailing Address Bill Payment Center

Date of Disbursement

M M	D D	Y Y Y Y
08	29	2016

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Mobile Telephone Service and equipment

001

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

506.43

Transaction ID : SB17.18581

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. A T & T

Mailing Address Bill Payment Center

Date of Disbursement

M M	D D	Y Y Y Y
09	27	2016

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Mobile Telephone Service

001

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

506.43

Transaction ID : SB17.18582

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Congressional Black Caucus Foundation, Inc.

Mailing Address 1004 Pennsylvania Ave., S.E.

Date of Disbursement

M M	D D	Y Y Y Y
09	08	2016

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
ALC Table Payment Made by Yardly Pollas

007

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

1600.00

Transaction ID : SB17.18608

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1012.86

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. CubeSmart IL. Chicago East

Mailing Address 407 E. 25th Street

City
ChicagoState
ILZip Code
60616Purpose of Disbursement
Quarterly Storage Space Rental

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	09	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

813.00

Transaction ID : SB17.18600

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harland Clarke

Mailing Address Not Available

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Check Order

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	21	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

30.03

Transaction ID : SB17.18584

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Harland Clarke

Mailing Address Not Available

City
ChicagoState
ILZip Code
60600Purpose of Disbursement
Check Orders

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

194.46

Transaction ID : SB17.18585

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1037.49

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. HIGH STYLE MARKETING & PRMailing Address 47 W. Polk St.
Ste. 103City
ChicagoState
ILZip Code
60605Purpose of Disbursement
PUBLIC RELATIONS SERVICES RENDERED

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	29	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1810.63

Transaction ID : SB17.18597

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jackson, Sheila L., , ,

Mailing Address P.O. Box 8443

City
ChicagoState
ILZip Code
60680-8443Purpose of Disbursement
Accounting Fee

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.18589

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jackson, Sheila L., , ,

Mailing Address P.O. Box 8443

City
ChicagoState
ILZip Code
60680-8443Purpose of Disbursement
Accounting Services

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.18606

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2910.63

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Jackson, Sheila L., , ,

Mailing Address P.O. Box 8443

City
ChicagoState
ILZip Code
60680-8443Purpose of Disbursement
Accounting Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.18586

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jackson, Sheila L., , ,

Mailing Address P.O. Box 8443

City
ChicagoState
ILZip Code
60680-8443Purpose of Disbursement
Accounting Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.18587

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Office Depot

Mailing Address 5420 S. Lake Park Ave.

City
ChicagoState
ILZip Code
60615Purpose of Disbursement
Office Supplies and Toner

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

148.77

Transaction ID : SB17.18601

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1248.77

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Parks, Warren, Natt, ,

Mailing Address 14015 Belle Ave.

City
CulpeperState
VAZip Code
22701Purpose of Disbursement
ALC Transportation

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

960.00

Transaction ID : SB17.18607

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pollas, Yardly, , ,

Mailing Address n/a

City
WashingtonState
DCZip Code
20000Purpose of Disbursement
REIMBURSEMENT OF CBC LEGISLATIVE CONFERENCES
EXPENDITURES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

4800.00

Transaction ID : SB17.18598

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Pugh, Jones, Johnson & Quandt, P.C.Mailing Address 180 N. LaSalle Street
Ste 3400City
ChicagoState
ILZip Code
60601Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : SB17.18603

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

20760.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. Southwest Vacations

Mailing Address 8929 N Port Washington

City
MilwaukeeState
WIZip Code
53217Purpose of Disbursement
Prepaid Airfare and Hotel for ACL Guest by Yardly Pollas

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1062.19

Transaction ID : SB17.18609

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

73001.83

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 31

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DEVLIN SCHOOP

Mailing Address P. O. BOX 6241

City
CHICAGOState
ILZip Code
60680-6241Purpose of Disbursement
Refund of Primary Election Contribution erroneously reported as a Federal
Committee contribution
Candidate Name

010

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20C.18591

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF TOM GREENHAW

Mailing Address 901 N. WOOD ST., UNIT 2

City
CHICAGOState
ILZip Code
60622Purpose of Disbursement
Refund of contribution erroneously reported as a Federal Committee
Contribution
Candidate Name

010

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB20C.18592

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3200.00

TOTAL This Period (last page this line number only).....▶

3200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 31

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. CONGRESSIONAL BLACK CAUCUS POLITICAL ACTION COMMITTEE(CBC-PAC) Full Name (Last, First, Middle Initial) Mailing Address 1701 Pennsylvania Ave. Suite 960 City Washington State DC Zip Code 20006 Purpose of Disbursement CONTRIBUTION FOR CBC CONFERENCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:				Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016 FEC Identification Number C C00147512 Amount of Each Disbursement this Period 8000.00 Transaction ID : SB21.18596 <input type="checkbox"/> Memo Item	
B. FIRST JURISDICTION - ILLINOIS Full Name (Last, First, Middle Initial) Mailing Address 1233 West 109th Place Office of the Bishop City Chicago State IL Zip Code 60643 Purpose of Disbursement Dention Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:				Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016 FEC Identification Number C Amount of Each Disbursement this Period 3500.00 Transaction ID : SB21.18593 <input type="checkbox"/> Memo Item	
C. JOHN MARSHALL IALUMNI ASSOCIATION Full Name (Last, First, Middle Initial) Mailing Address 3250 WEST ADAMS STREET City CHICAGO State IL Zip Code 60624 Purpose of Disbursement Lifetime Membership and Hall of Fame Registration Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:				Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2016 FEC Identification Number C Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.18594 <input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional) ▶				12000.00	
TOTAL This Period (last page this line number only) ▶				12000.00	

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 25 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Amber, Inn

Nature of Debt (Purpose):

Space Rental

Mailing Address 3901 S. Michigan Avenue

City
ChicagoState
ILZip Code
60653

Outstanding Balance Beginning This Period

1300.00

Transaction ID : SD10.2928

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Apostolic Faith Church

Nature of Debt (Purpose):

Refund

Mailing Address 3823 S. Indiana Ave.

City
ChicagoState
ILZip Code
60653

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.457

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

A T & T

Nature of Debt (Purpose):

LONG DISTANCE

Mailing Address Bill Payment Center

City
ChicagoState
ILZip Code
60600

Outstanding Balance Beginning This Period

1318.61

Transaction ID : SD10.2909

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1318.61

1) **SUBTOTALS** This Period This Page (optional)

3118.61

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 OF 31

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bloomenthal, Leah, , ,

Nature of Debt (Purpose):

Office Supplies

Mailing Address 6325 N. Sheridan

City
ChicagoState
ILZip Code
60647

Outstanding Balance Beginning This Period

62.40

Transaction ID : SD10.458

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

62.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chubb Group Insurance Companies

Nature of Debt (Purpose):

Insurance

Mailing Address 30 N. LaSalle
Suite 3510City
ChicagoState
ILZip Code
60602

Outstanding Balance Beginning This Period

1910.00

Transaction ID : SD10.2924

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1910.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Citizens for Gary Lapille

Nature of Debt (Purpose):

Refund

Mailing Address P.O. Box 64665

City
ChicagoState
ILZip Code
60664-1664

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.459

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

3972.40

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ComEd

Nature of Debt (Purpose):

Electricity

Mailing Address Bill Payment Center

City
ChicagoState
ILZip Code
60600

Outstanding Balance Beginning This Period

9.96

Transaction ID : SD10.8787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Friends of Bobby Rush

Nature of Debt (Purpose):

Estimated Debt for Space usage. Actual
amount To Be Determined'

Mailing Address P.O. Box 7292

City
ChicagoState
ILZip Code
60680-7292

Outstanding Balance Beginning This Period

2100.00

Transaction ID : SD10.16392

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Grainger Terry, Inc.

Nature of Debt (Purpose):

Printing & Mailing

Mailing Address 1965 W. Pershing Road
Building A, 3rd FloorCity
ChicagoState
ILZip Code
60609

Outstanding Balance Beginning This Period

6890.00

Transaction ID : SD10.11451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6890.00

1) **SUBTOTALS** This Period This Page (optional)

8999.96

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodges, Charisse, , ,

Nature of Debt (Purpose):

Salary

Mailing Address 3348 S. Giles Ave.

City
ChicagoState
ILZip Code
60616

Outstanding Balance Beginning This Period

850.00

Transaction ID : SD10.460

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

James Biery Communications

Nature of Debt (Purpose):

Public Relations Fee

Mailing Address 435 W. Wisconsin

City
ChicagoState
ILZip Code
60614

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.461

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lori Ann Bass & Associates

Nature of Debt (Purpose):

Fundraising Fee

Mailing Address 730 N. Franklin

City
ChicagoState
ILZip Code
60611

Outstanding Balance Beginning This Period

94.54

Transaction ID : SD10.462

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

94.54

1) **SUBTOTALS** This Period This Page (optional)

1944.54

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 OF 31

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McCoy, Gil N., , ,

Nature of Debt (Purpose):
Refund

Mailing Address 5210 S. Blackstone

City
ChicagoState
ILZip Code
60615

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

People's Energy

Nature of Debt (Purpose):
Heating Fuel

Mailing Address Bill Payment Center

City
ChicagoState
ILZip Code
60600

Outstanding Balance Beginning This Period

1403.92

Transaction ID : SD10.8788

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1403.92

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Progressive Land Developers

Nature of Debt (Purpose):
Office Rent

Mailing Address 7801 S. Cottage Grove

City
ChicagoState
ILZip Code
60619

Outstanding Balance Beginning This Period

1400.00

Transaction ID : SD10.452

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

1) **SUBTOTALS** This Period This Page (optional)

3803.92

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trib-Co Construction

Nature of Debt (Purpose):

Refund

Mailing Address 500 West Monroe

City
ChicagoState
ILZip Code
60661

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.453

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trilla Stell Drum Corp.

Nature of Debt (Purpose):

Refund

Mailing Address 2959 West 47th Street

City
ChicagoState
ILZip Code
60632

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.454

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Vision, Health Mgmt Systems

Nature of Debt (Purpose):

REfund

Mailing Address 2838 S. Indiana

City
ChicagoState
ILZip Code
60616

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.455

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)

750.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Wright, Robert, , ,

Nature of Debt (Purpose):

Salary

Mailing Address 1212 S. Michigan

City

Chicago

State

IL

Zip Code

60609

Outstanding Balance Beginning This Period

3000.00

Transaction ID : SD10.456

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

3000.00

2) **TOTALS** This Period (last page this line number only)

25589.43

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

25589.43